1051 Boston Post Road Rye, New York 10580 http://www.ryeny.gov



Tel: (914) 967-7303 Fax: (914) 967-7370

## **CITY OF RYE Department of Finance**

## **Direct Deposit of Payroll Authorization**

Please fill out and return to the Payroll Department

I authorize you to deposit my net pay automatically to my account specified below each payday by initiating credit entries to my account electronically or by any other commercially accepted method, and I authorize the financial institution named below to credit the same to my account. If funds to which I am not entitled are deposited to my account, I authorize you to direct the financial institution to return said funds by any such method, and authorize the financial institution to debit the same to my account. This authority will remain in effect until you have received written notice from me of its cancellation in such time and manner as to afford you and the institution a reasonable opportunity to act on it.

Attach a voided check to this Authorization (where applicable).			
Employee Name	Signature		Date
Financial Institution	Branch Address		
City	State		Zip Code
Account Title			
Transit Routing Number			
Account Type:	_ Checking Account	S	Savings Account
Account Number			